TDANOMITTAL FOR		Application No.	10/815,606	
TRANSMITTAL FOR	K IVI	Filing Date	March 31, 2004	
(to be used for all correspondence after initial filing)		First Named Inventor	Wang Yueh	
		Art Unit	1752	
		Examiner Name	Thornton, Yvette C.	
Total Number of Pages in This Submission	13	Attorney Docket Number	42P18695	

ENCLOSURES (check all that apply)					
Fee Transmittal	Form	Drawing(s)	After Allowance Communication to Group		
Fee Attack	hed	Licensing-related Papers	Appeal Communication to Board of Appeals and Interferences		
Amendment / Re	esponse	Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)			
After Final	l declaration(s)	Petition to Convert a Provisional Application	Proprietary Information		
Extension of Tim	e Request	Status Letter			
Express Abandonment Request			Other Enclosure(s) (please identify below):		
Information Disci	Information Disclosure Statement Request for Refund		First Class Certificate of Mailing and the stamped		
PTO/SB/0  Certified Copy of		CD, Number of CD(s)	return receipt postcard		
Document(s)					
Response to Missing Parts/ Incomplete Application Remarks					
Basic Filing Fee					
Declaration/POA					
Response to Missing Parts under 37 CFR 1.52 or 1.53					
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT					
Firm or	Brent E. Vecchi	a, Reg. No. 48,011			
Individual name BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP					
Signature Frent E. Veahie					
Date 7/15/05					
CERTIFICATE OF MAILING/TRANSMISSION					
	rst class majl in an env	ing deposited with the United States Postal Selope addressed to: Mail Stop Amendment, C			
Typed or printed nar	me Kyista Math	eson V/			
Signature 1 MSTO 1 Othus On Date 1 MM 512005					
Based on PTO/SB/21 (04-04) as modified by Blakely, Solokoff, Taylor & Zafman (w/r) 06/04/2004. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450					

Complete if Known  Application Number   10/815,606    Filing Date   March 31, 2004    First Named Inventor   Wang Yueh    Examiner Name   Thornton, Yvette C.    Art Unit   1752    Attorney Docket No.   42P18695    METHOD OF PAYMENT   (\$)   0.00    METHOD OF PAYMENT   (check all that apply)    Check   Credit card   Money Order   None   Other (please identify):	JUL 18 2005 5			
For FY 2005  Patient loses are subject to annual revision.  Filing Date Filing	TO ANOM	TTAI		Complete if Known
Applicant claims small entity status. See 37 CFR 1.27.   Examiner Name   Thornton, Yvette C.			Application Number	10/815,606
Applicant claims small entity status. See 37 CFR 1.27.  TOTAL AMOUNT OF PAYMENT  (\$) 0.00    Art Unit   1752   Attorney Docket No.   42P18695    METHOD OF PAYMENT   (check all that apply)	for FY 200	15	Filing Date	March 31, 2004
Applicant claims small entity status. See 37 CFR 1.27.  TOTAL AMOUNT OF PAYMENT  (\$) 0.00  METHOD OF PAYMENT (check all that apply)  MCheck   Credit card   Money Order   None   Other (please identify):  Deposit Account Deposit Account Number: 02-2666  For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)  Charge fee(s) indicated below   Charge fee(s) indicated below, except for the filing fee  Charge any additional fee(s) or underpayment of fee(s)  Under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.  Total Claims   21	Patent lees are subject to annual re	vision.	First Named Inventor	Wang Yueh
TOTAL AMOUNT OF PAYMENT (\$) 0.00 Art Unit Attorney Docket No. 42P18695  METHOD OF PAYMENT (check all that apply)  MCheck □Credit card □ Money Order □None □Other (please identify): □Charce fee(s) indicated below □Charge fee(s) indicated below □Charge fee(s) indicated below □Charge any additional fee(s) or underpayment of fee(s) □Charge any additional fee(s) or underpayment of fee(s) □Charge fee(s) indicated below □Charge fee(s) □Credit any overpayments □Charge fee(s) □Catrins □C	Applicant claims small entity status.	See 37 CFR 1.27.	Examiner Name	
METHOD OF PAYMENT (check all that apply)    Check			Art Unit	
Check	TOTAL AMOUNT OF PAYMENT	(\$) 0.00	Attorney Docket No.	42P18695
Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP  For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)  Charge fee(s) indicated below  Charge any additional fee(s) or underpayment of fee(s)  under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.  FEE CALCULATION  1. EXTRA CLAIM FEES  Code So So Small Entity  Fee Paid  Large Entity  Small Entity  Fee Description  Code (5)  1202 50 2202 25 Claims in excess of 3	METHOD OF PAYMENT (check a	Il that apply)		
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)  Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee  Charge any additional fee(s) or underpayment of fee(s) under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.  FEE CALCULATION  1. EXTRA CLAIM FEES Cdatms Claims Independent Claims Multiple Dependent Large Free Fee Fee Fee Fee Fee Fee Fee Fee Fee	☑Check ☐Credit card ☐ Money	Order None C	Other (please identify):	
Charge fee(s) indicated below  Charge fee(s) indicated below, except for the filing fee  Charge any additional fee(s) or underpayment of fee(s) under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.  FEE CALCULATION  1. EXTRA CLAIM FEES  Charge fee(s) indicated below, except for the filing fee  Credit any overpayments  Credit any overpayments  Fee Paid  Total Claims  21 30 4 = 0	Deposit Account Deposit Account	Number: <u>02-2666</u> D	eposit Account Name:	Blakely, Sokoloff, Taylor & Zafman LLP
1. EXTRA CLAIM FEES    Claims   Claims   Dependent   Claims   Clai	☐ Charge fee(s) indicated below ☐ Charge any additional fee(s)	v or underpayment of fee(	Charge fee(s)	indicated below, except for the filing fee
Total Claims	FEE CALCULATION			
1204 300 2204 150 "Reissue independent claims over original patent 1205 300 2205 150 "Reissue claims in excess of 20 and over original patent 1205 300 SUBTOTAL (1) (\$\sigma\$) 0.00	Total Claims	below Fee Paid  50.00 = \$0.00  200.00 = \$0.00  of 20  ns in excess of 3  ent claim, if not paid ndent claims over original patent in excess of 20 and over original patent	ent **or number	previously paid, if greater, For Reissues, see below
Large Entity Small Entity  Fee Fee Fee Fee Fee	Large Entity Small Entity			
Code   (5)   Code   (5)   Fee Description   Fee Paid	Code         (5)         Code         (5)           1051         130         2051         65         Surcharge - la           1052         50         2052         25         Surcharge - la           2053         130         2053         130         Non-English s           1251         120         2251         60         Extension for r           1252         450         2252         225         Extension for r           1253         1,020         2253         510         Extension for r           1254         1,590         2254         795         Extension for r           1255         2,160         2255         1,080         Extension for r           1401         500         2401         250         Notice of Apprint           1402         500         2402         250         Filling a brief in           1403         1,000         2403         500         Request for or           1451         2451         Petition to inst           1460         130         2460         130         Petitions to th           1807         50         1807         50         Processing fee           1806         18	te filing fee or oath e provisional filing fee or cover sheet pecification eply within first month eply within second month eply within third month eply within fourth month eply within fifth month all is support of an appeal al hearing fute a public use proceeding is Commissioner under 37 CFR 1.17(q) Information Disclosure Stmt sion after final rejection (37 CFR § 1 onal invention to be examined (37 Cf.)	.129(a))	

SUBMITTED BY				Comp	Complete (if applicable)	
Name (Print/Type)	Brent E. Vecchia	Registration No. (Attorney/Agent)	48,011	Telephone	(303) 740-1980	
Signature	Kent E. Veedie			Date	7/15/05	